

General Assembly

Committee Bill No. 326

January Session, 2017

LCO No. 3762



Referred to Committee on PUBLIC HEALTH

Introduced by: (PH)

## AN ACT CONCERNING ACCESS TO MEDICAL RECORDS AND THE FEES CHARGED FOR MEDICAL RECORDS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Section 20-7c of the general statutes is repealed and the
- 2 following is substituted in lieu thereof (*Effective October 1, 2017*):
- 3 (a) For purposes of this section, "clinical laboratory" has the same
- 4 meaning as provided in section 19a-30. "Clinical laboratory" does not
- 5 include any state laboratory established by the Department of Public
- 6 Health pursuant to section 19a-26 or 19a-29.
- 7 (b) Except as provided for in subsection [(e)] (i) of this section, a
- 8 provider shall (1) supply to a patient upon request complete and
- 9 current information possessed by that provider concerning any
- 10 diagnosis, treatment and prognosis of the patient, and (2) notify a
- 11 patient of any test results in the provider's possession or requested by
- 12 the provider for the purposes of diagnosis, treatment or prognosis of
- such patient. In addition, upon the request of a patient or a provider
- who orders medical tests on behalf of a patient, a clinical laboratory
- 15 shall provide medical test results relating to the patient to (A) the

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patient, or (B) any other provider who is treating the patient for the purposes of diagnosis, treatment or prognosis of such patient.

- (c) A provider, who requests that his or her patient submit to repeated medical testing at regular intervals, over a specified period of time, for purposes of ascertaining a diagnosis, prognosis or recommended course of treatment for such patient, may issue a single authorization that allows the entity that conducts such medical testing, including, but not limited to, a clinical laboratory, to directly communicate the results of such testing to the patient for the period of time that such testing is requested by the provider.
- (d) [Upon] Except as provided in subsection (i) of this section and section 4-194, upon a written request of a patient, a patient's attorney or authorized representative, or pursuant to a written authorization, a provider [, except as provided in section 4-194,] shall furnish to the person making such request a copy of the patient's health record, including but not limited to, bills, x-rays and copies of laboratory reports, contact lens specifications based on examinations and final contact lens fittings given within the preceding [three months] three-month period or such longer period of time as determined by the provider but no longer than [six months] a six-month period, records of prescriptions and other technical information used in assessing the patient's health condition.
- (e) No provider shall refuse to return to a patient original records or copies of records that the patient has brought to the provider from another provider. When returning records to a patient, a provider may retain copies of such records for the provider's file, provided such provider does not charge the patient for the costs incurred in copying such records.
- (f) No provider shall charge more than (1) sixty-five cents per page, [including any research fees, handling fees or related costs, and the cost of first class postage, if applicable, for furnishing a health record pursuant to this subsection, except such provider may charge a

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patient] (2) twenty dollars for research and handling fees for furnishing a paper or electronic copy of a health record, or any part thereof, pursuant to this section, except no research and handling fees shall be charged for furnishing a paper or electronic copy of a health record to (A) a patient, or (B) an attorney for a patient who has previously made a request of such provider for the patient's health record and obtained a copy of such health record, provided (i) the attorney requests only the part of such health record that has been generated since the date of the initial request, (ii) the part of such health record furnished under this subparagraph is maintained in the same health records system as the health record previously furnished to such attorney, (iii) the part of such health record furnished under this subparagraph was not included in the health record furnished in response to the initial request, and (iv) the request is made not more than twelve months after the date the health record furnished in response to the initial request was sent or delivered to the attorney, and (3) one hundred fifty-five dollars for furnishing an electronic copy of a health record, or any part thereof, pursuant to this subsection. Except as otherwise provided in this section, a provider may charge a patient or other person (I) for the cost of first class postage for furnishing a copy of a health record pursuant to this section, (II) the amount necessary to cover the cost of materials for furnishing a copy of an x-ray, [provided no such charge shall be made] and (III) a certification fee of not more than ten dollars, if certification of the health record is requested. No provider shall charge for furnishing a paper or electronic copy of a health record, or part thereof, to a patient, a patient's attorney or authorized representative if the health record [or part thereof] is necessary for the purpose of supporting a claim or appeal under any provision of the Social Security Act or a claim or appeal for veterans' benefits under any provision of Title 38 of the United States Code or chapter 506 and the request for the health record is accompanied by documentation of the claim or appeal.

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(g) A provider shall furnish a health record requested pursuant to this section [within] not later than thirty days [of] after the request.

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(h) No health care provider, who has purchased or assumed the practice of a provider who is retiring or deceased, may refuse to return original records or copied records to a patient who decides not to seek care from the successor provider. When returning records to a patient who has decided not to seek care from a successor provider, such provider may not charge a patient for costs incurred in copying the records of the retired or deceased provider.

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[(e)] (i) If a provider reasonably determines that the information is detrimental to the physical or mental health of the patient, or is likely to cause the patient to harm himself, herself or another, the provider may withhold the information from the patient. The information may be supplied to an appropriate third party or to another provider who may release the information to the patient. If disclosure of information is refused by a provider under this subsection, any person aggrieved thereby may, [within] not later than thirty days [of] after such refusal, petition the superior court for the judicial district in which such person resides for an order requiring the provider to disclose the information. Such a proceeding shall be privileged with respect to assignment for trial. The court, after hearing and an in camera review of the information in question, shall issue the order requested unless it determines that such disclosure would be detrimental to the physical or mental health of the person or is likely to cause the person to harm himself, herself or another.

[(f)] (j) The provisions of this section shall not apply to any information relative to any psychiatric or psychological [problems or conditions] illness or condition.

[(g)] (k) In the event that a provider abandons his or her practice, the Commissioner of Public Health may appoint a licensed health care provider to be the keeper of the records. [, who] The keeper of the records shall be responsible for disbursing the original health records to the provider's patients, upon the request of any such patient.

[(h)] (l) The Commissioner of Public Health shall adopt regulations,

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- in accordance with the provisions of chapter 54, to carry out the provisions of this section.
- Sec. 2. Section 19a-490b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2017*):

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(a) Upon the written request of a patient or the patient's attorney or authorized representative, or pursuant to a written authorization, an institution licensed pursuant to this chapter shall furnish to the person making such request a copy of the patient's health record, including but not limited to, copies of bills, laboratory reports, prescriptions and other technical information used in assessing the patient's health condition. In addition, an institution shall provide the patient or the patient's designated health care provider with a reasonable opportunity to examine retained tissue slides and retained pathology tissue blocks. Upon the written request of the patient, the patient's attorney or the patient's designated health care provider, an institution shall send the original retained tissue slide or original retained tissue block directly to the patient's designated licensed institution, laboratory or physician. If the original slide or block is not available or if a new section cut of the original slide or block is a fair representation of the original slide or block, then the institution may send the new section cut, [which] that is clearly labeled as a new section cut, to the patient's designated health care provider. Any patient or [the] a patient's attorney or authorized representative who is provided with an original retained slide, tissue block or a new section under the provisions of this subsection shall be solely responsible for safeguarding and returning the slide, block or new section to the institution. Any institution [or laboratory] that has released an original slide, an original tissue block or new section pursuant to the provisions of this subsection shall not be subject to any liability arising out of releasing or not retaining the slide, block or new section and no cause of action for damages shall arise against any such institution for releasing or not retaining the slide, block or new section. [No such institution shall charge more than sixty-five cents per page, including

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any research fees, clerical fees, handling fees or related costs, and the cost of first class postage, if applicable, for furnishing or providing access to a health record pursuant to this subsection, except such an institution may charge the amount necessary to cover its cost of materials for furnishing a copy of an x-ray or for furnishing an original retained slide, an original tissue block or a new section cut from a retained pathology tissue block.] An institution shall furnish a copy of a patient's health record to the patient or the patient's attorney or authorized representative making a written request for such health record not later than thirty days after the date of the request, except when such request is made less than thirty days after the date of the patient's discharge from the institution, in which case the institution shall furnish the requested health record upon its completion. For purposes of this subsection, "health care provider" means an institution [or laboratory] licensed under this chapter or licensed in the state where located or a physician licensed under chapter 370 or licensed in the state where located.

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(b) No institution shall charge more than (1) sixty-five cents per page, (2) twenty dollars for research and handling fees for furnishing a paper or electronic copy of a health record, or any part thereof, pursuant to this section, except no research and handling fees shall be charged for furnishing a paper or electronic copy of a health record to (A) a patient, or (B) an attorney for a patient who has previously made a request for the patient's health record, provided (i) the attorney requests only the part of such health record that has been generated since the date of the initial request, (ii) the part of such health record furnished under this subparagraph is maintained in the same health records system as the health record previously furnished to such attorney, (iii) the part of such health record furnished under this subparagraph was not included in the health record furnished in response to the initial request, and (iv) the request is made not more than twelve months after the date the health record furnished in response to the initial request was sent or delivered to the attorney, and (3) one hundred fifty-five dollars for furnishing an electronic copy

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of a health record, or any part thereof, pursuant to this section. Except as otherwise provided in this section, an institution may charge a patient or other person (I) for the cost of first class postage for furnishing a copy of a health record pursuant to this section, (II) the amount necessary to cover the cost of materials for furnishing a copy of an x-ray or for furnishing an original retained slide, an original tissue block or a new section cut from a retained pathology tissue block, and (III) a certification fee of not more than ten dollars, if certification of the health record is requested.

[(b)] (c) No institution [licensed pursuant to this chapter] shall charge for furnishing a paper or electronic copy of a health record, or part thereof, to a patient, [his] a patient's attorney or [conservator] authorized representative if the health record [or part thereof] is necessary for the purpose of supporting a claim or appeal under any provision of the Social Security Act or a claim or appeal for veterans' benefits under any provision of Title 38 of the United States Code or chapter 506 and the request for the [records] health record is accompanied by documentation of the claim or appeal. [An institution shall furnish the requested record within thirty days of the request, unless the request was received in less than thirty days subsequent to the date the patient was discharged, in which case the institution shall furnish the requested record upon its completion.]

[(c) Each] (d) An institution [licensed pursuant to this chapter] shall maintain information regarding each patient's status as a veteran, as defined in subsection (a) of section 27-103. Said information shall be made available, upon request, to any duly authorized representative of the Department of Veterans Affairs.

[(d)] (e) No institution may deny a person the records available under subsection (a) of this section because of the person's inability to pay the required fees. An affidavit from such person attesting to an inability to pay such fees shall be presumptive evidence thereof.

[(e) Each institution licensed pursuant to this chapter] (f) An

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213 institution that ceases to operate shall, at the time it relinquishes its 214 license to the department, provide to the department a certified 215 document specifying: (1) The location at which patient health records 216 will be stored; (2) the procedure that has been established for patients, 217 former patients or their authorized representatives to secure access to 218 such health records; (3) provisions for storage, should the storage 219 location cease to operate or change ownership; and (4) that the 220 department is authorized to enforce the certified document should the 221 storage location cease to operate or change ownership. An institution 222 that fails to comply with the terms of a certified document provided to 223 the department in accordance with this subsection shall be assessed a 224 civil penalty not to exceed one hundred dollars per day for each day of 225 noncompliance with the terms of the certified agreement.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2017	20-7c
Sec. 2	October 1, 2017	19a-490b

## Statement of Purpose:

To make changes to the statutes concerning access to medical records and the fees charged for medical records to conform to the health care industry.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

Co-Sponsors: SEN. MARKLEY, 16th Dist.

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